

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 241 OF 1376

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLINS, PONCHITA, , ,**

Mailing Address 7241 S Merrill Avenue

 City  
 Chiacgo

 State  
 IL

 Zip Code  
 60649

 FEC ID number of contributing  
 federal political committee.

 C 

 Name of Employer (for Individual)  
 AFSCME IL CN 31/STATE OF IL

 Occupation (for Individual)  
 PAYMENT SERVICES REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 333.28 

Date of Receipt

 M M M /  D D D /  Y Y Y Y Y Y  
 11 / 29 / 2019

Transaction ID : SA11AI.242369

Amount of Each Receipt this Period

 41.66 
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINS, WAYLON, T., ,**

Mailing Address 9599 Cooley Road

 City  
 Albany

 State  
 OH

 Zip Code  
 45710

 FEC ID number of contributing  
 federal political committee.

 C 

 Name of Employer (for Individual)  
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)  
 THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 215.00 

Date of Receipt

 M M M /  D D D /  Y Y Y Y Y Y  
 11 / 08 / 2019

Transaction ID : SA11AI.243024

Amount of Each Receipt this Period

 11.50 
☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINS, WAYLON, T., ,**

Mailing Address 9599 Cooley Road

 City  
 Albany

 State  
 OH

 Zip Code  
 45710

 FEC ID number of contributing  
 federal political committee.

 C 

 Name of Employer (for Individual)  
 AFSCME OH LOC 11/STATE OF OH

 Occupation (for Individual)  
 THERAPUTIC PROGRAM TECHNICIA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

 226.50 

Date of Receipt

 M M M /  D D D /  Y Y Y Y Y Y  
 11 / 22 / 2019

Transaction ID : SA11AI.243569

Amount of Each Receipt this Period

 11.50 
☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

 64.66 
**TOTAL** This Period (last page this line number only)..... ►